

Cancer care – Candidate instructions

You are the FY1 on the oncology admissions unit and you have been asked to speak to and assess this patient.

Mary Jane, an 83-year-old has been referred with constipation. They have a previous diagnosis of renal cell carcinoma.

A copy of oncology letter and observation chart will be provided in your reading time.

You will have 20 minutes for this station and will be required to:

0-10 mins

- Take a history (8 minutes)
- Answer examiners questions relating to findings (2 mins)

10-20 mins

- Discuss the patient's recent investigation results with them
- Share the management
- Answer any questions the patient has

Oncology letter

11/12/23

Oncology
department

Mary Jane
2 Lemon Street
Leicester

Dear Doctor,

Diagnosis:
Renal cell carcinoma

I have reviewed Mary in clinic today. She has stage I renal cell adenocarcinoma which was diagnosed 2 weeks. We have discussed the options for treatment and Mary has decided to go ahead with a partial nephrectomy.

Follow up: I have arranged for her to have further imaging and pre-op appointment. I will see her back in my clinic in 3 week's time to discuss results of further tests and answer any questions and concerns she may have about surgery.

Yours sincerely,

Dr Smith

Cancer care – Patient instructions

Presenting complaint: I have noticed that over the last 4/5 days I have become more constipated.

History of presenting complaint: Still passing wind, not painful, last time I went was 2 days ago but before I used to go every day, I tummy does feel a bit distended, the stools do look harder, no blood or mucus in stool.

Other relevant symptoms: have been feeling a bit of nausea in last couple of days, not feeling like eating much, I have been feeling more tired but just put that down to the cancer, not really noticed anything else.

ICE: no idea what is going on, Is the cancer getting worse? Could you do another scan to see what's happening?

PMH: Renal cell carcinoma, hypertension, type 2 diabetes

DHx: Candesartan, metformin, no allergies

FHx: My mum had breast cancer, nothing else.

SHx: I smoke about 15 a day for last 40 years, I have an appointment to stop though as the specialist told me to, never drank.

Systems review: Otherwise, I feel fine.

Other relevant history or instructions for actor: The diagnosis is hypercalcemia and this is a rough guide but feel free to add or remove things that you may think are relevant.

Cancer care – Examiner marksheet

Introduces themselves and confirms patient details	
Puts patient at ease and shows empathy	
Open questions and then narrows down	
History of presenting complaint	
Address ICE	
Asks about PMH	
Asks about DHx	
Asks about FHx, SHx and other history if relevant	
Summaries and clarifies	

Please fill out NEWs giving patient NEWs score of 0

What is your most likely diagnosis and why?

Hypercalcemia – justifies with relevant info from history, as well as stating RCC can cause hypercalcemia.

What examination would you like to perform?

Neurological examination

What investigations would you like to order?

Metabolic panel

Total serum calcium

Investigation results:

PTHrP: High

1,25 Vit D: Low

Calcium: High

Introduces themselves and confirms patient details	
Puts patient at ease and shows empathy	
Open questions and then narrows down	
History of presenting complaint	
Address ICE	
Asks about PMH	
Asks about DHx	
Asks about FHx, SHx and other history if relevant	
Summaries and clarifies	
Correctly answers examiners questions	

Correctly interprets all clinical information	
Explains investigations results accurately to patient	
Clarifies understanding	
Has a clear structure such as SPIKES	
Chunks down information and checks understanding	
Skilled in breaking bad news	
Holistic approach demonstrated	
Explains next steps within levels of competence	
Summarises and allows time for questions	

